Application or Docket Number
10/713896

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
IS	62	
	NUMBER FILED	NUMBER EXTRA
EABLE CLAIMS	62 minus 20 =	
CLAIMS	5 minus 3 =	
ENDENT CLAIM PRESENT		☐

se in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐		OR	OTHER THAN SMALL ENTITY	
RATE	FEE		RATE	FEE
BASIC FEE	385.00	OR	BASIC FEE	770.00
XS 9 =		OR	XS 18 =	
X 43 =		OR	X 86 =	
+145 =		OR	+290 =	
TOTAL		OR	TOTAL	

CLAIMS AS AMENDED - PART II

(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
*	Minus	**	=
*	Minus	***	=
ENTATION OF MULTIPLE DEPENDENT CLAIM			☐

SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9 =		OR	XS 18 =	
X 43 =		OR	X 86 =	
+145 =		OR	+290 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
*	Minus	**	=
*	Minus	***	=
NTATION OF MULTIPLE DEPENDENT CLAIM			☐

		OR		
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9 =		OR	XS 18 =	
X 43 =		OR	X 86 =	
+145 =		OR	+290 =	
TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	

(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA
*	Minus	**	=
*	Minus	***	=
NTATION OF MULTIPLE DEPENDENT CLAIM			☐

		OR		
RATE	ADDITIONAL FEE		RATE	ADDITIONAL FEE
XS 9 =		OR	XS 18 =	
X 43 =		OR	X 86 =	
+145 =		OR	+290 =	